

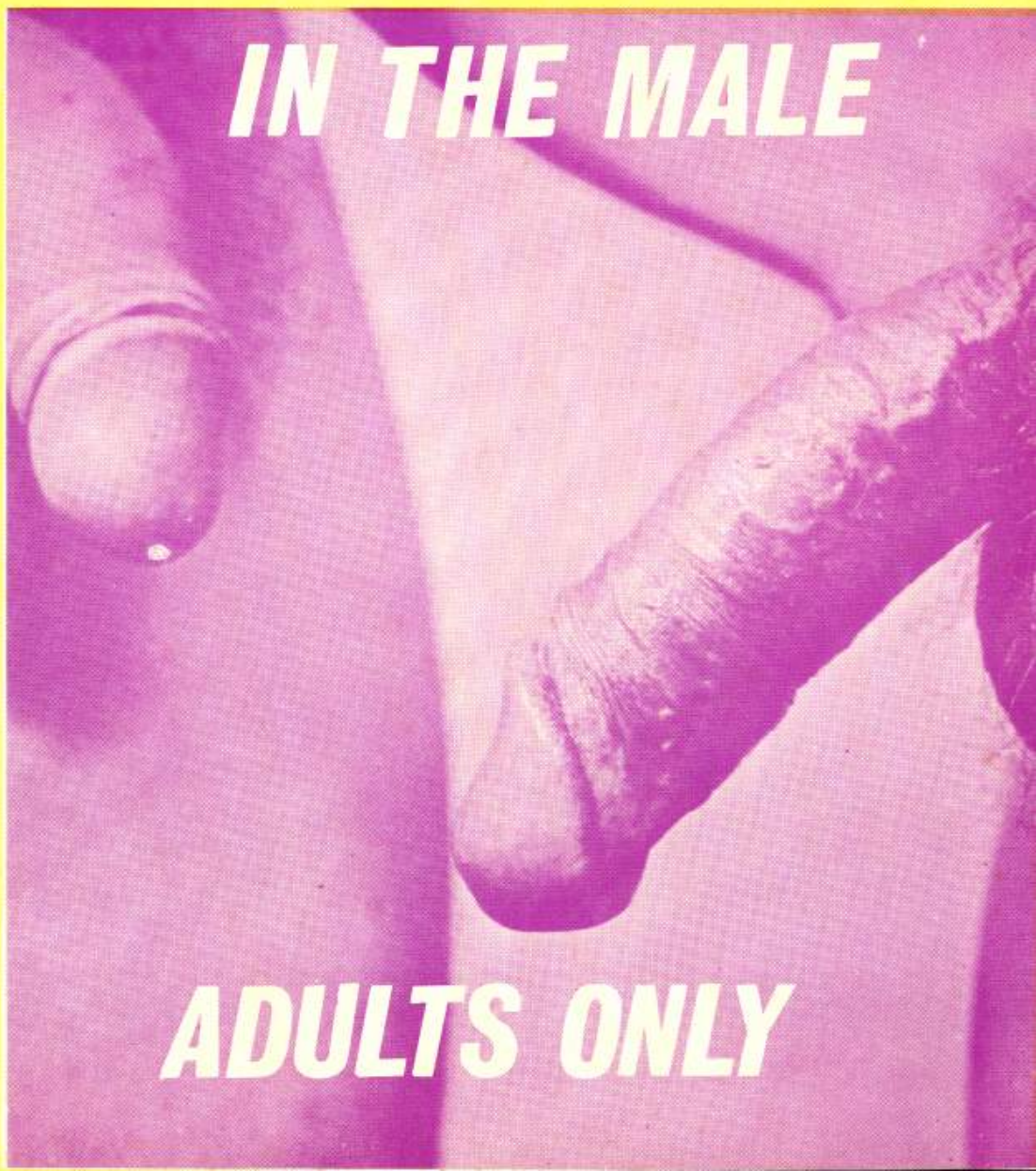
MYSTERIES OF PHALLIC ERECTION



"The ancient Greeks had Pan and Priapus and other well-endowed male deities. The phallic orientation naturally invaded their personal sex values . . ."

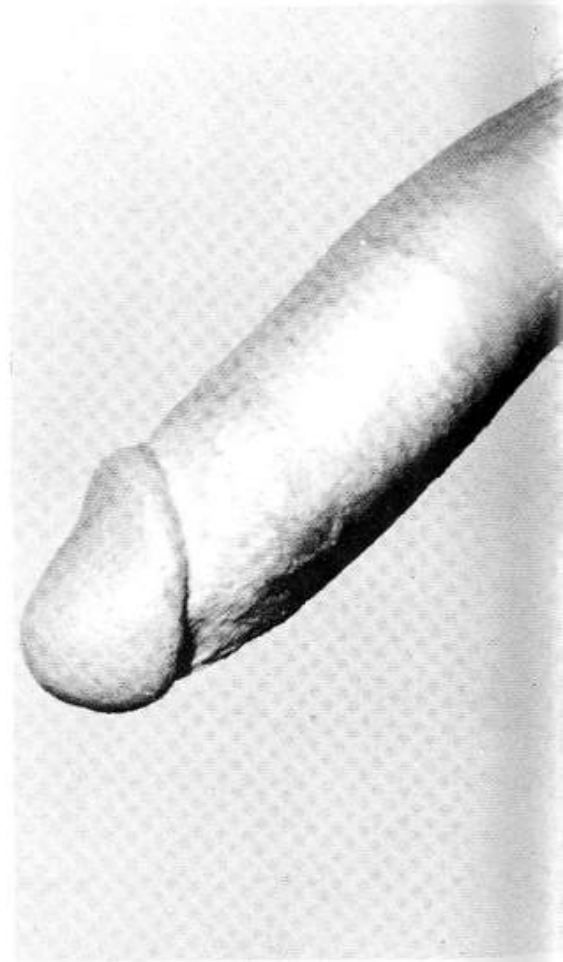
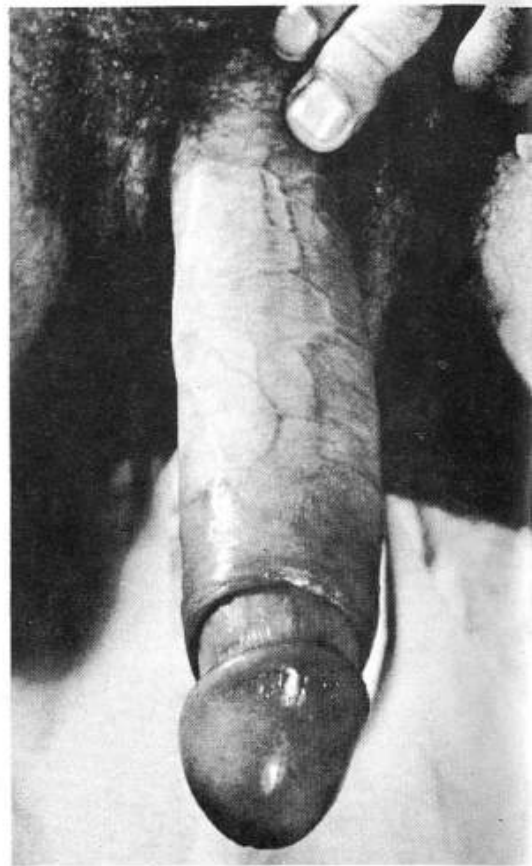
\$6.00

IN THE MALE



ADULTS ONLY

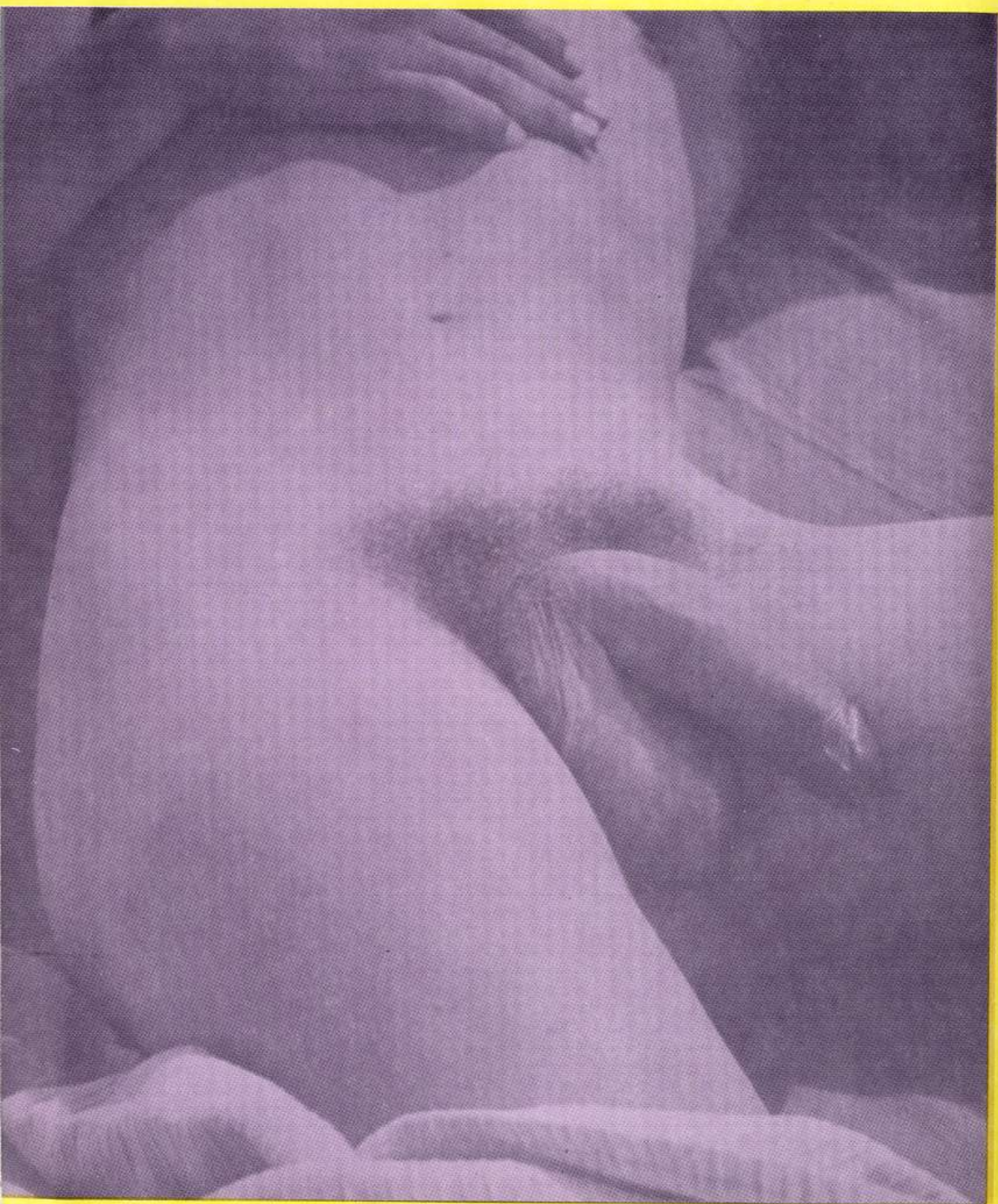
A Study of Phallic Erection in the Male



THE MALE SEX ORGANS

The male sexual parts are the penis with its glands and tissues, the scrotum which holds the testes, and the testes and ducts which lead from the scrotum to the penis. The obvious facts about the penis is that in the flaccid state it hangs down in front of the scrotum. Under sexual stimulation, it becomes stiff and erect. Just as a woman should thoroughly understand her body and its functions, in order to achieve a happy marital relationship, so a man must have a knowledge of the anatomy and function of his sexual parts. This can mean the difference between sexual happiness and frustration. Both the physiology of hormones and psychology of sex should be understood by everyone.







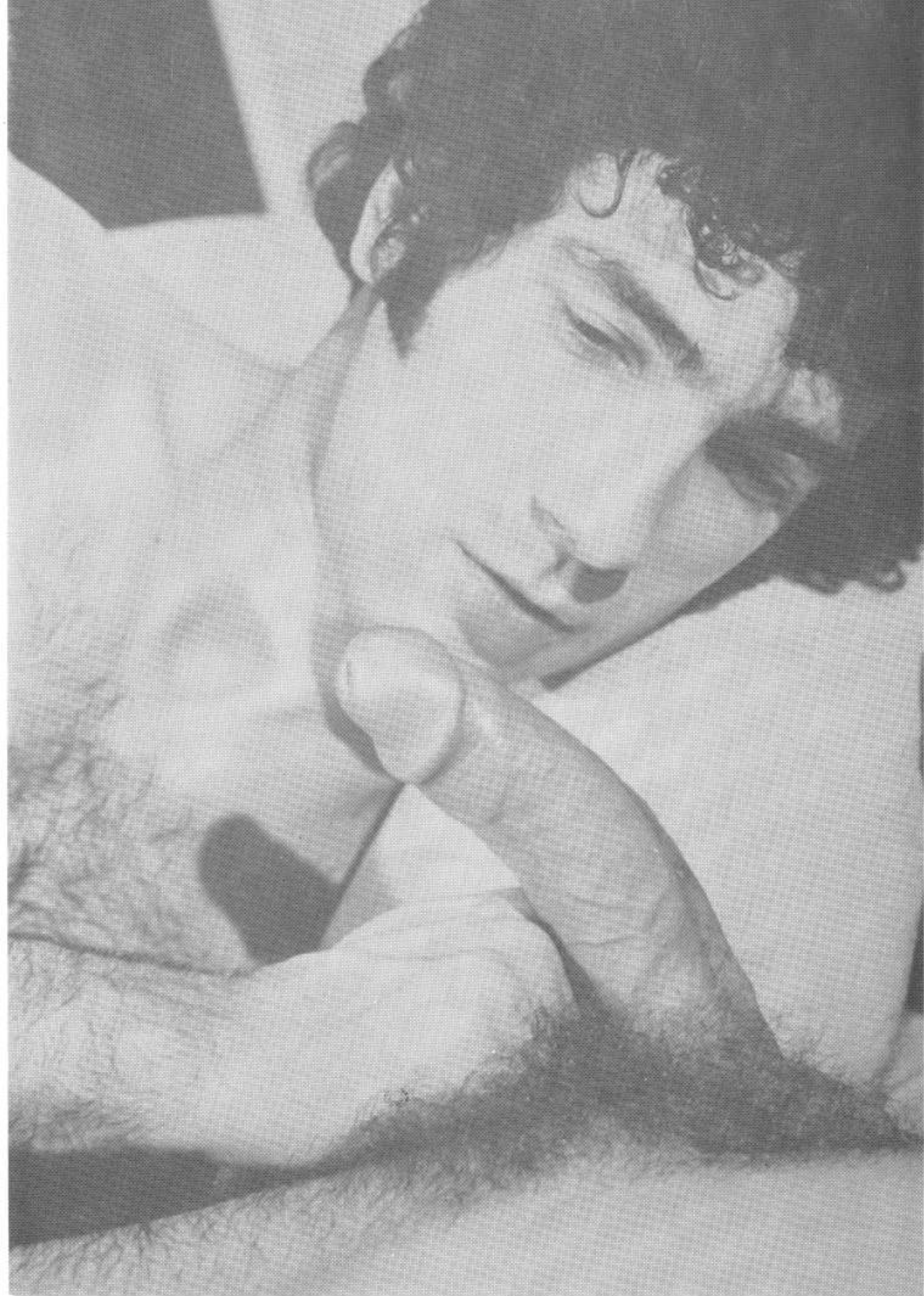




External Genital Organs —————

The external male genital organs are the penis and the scrotum. The penis consists of three principal parts; the head or glans penis, the body or shaft, and the root or base. The penis is the male organ both of urination and copulation. There is a small slit-like opening in the head at the tip which is called the meatus. This opening enables the urine and semen to pass out of the body. From the meatus, a tube called the urethra extends through the penis and connects with the bladder. The penis is a flaccid organ when not stimulated. Normally it hangs down in front of the scrotum. Under sexual excitation it becomes erect or tumescent. The average length of the erect penis is just over six inches, and there is a wide variation in size. The diameter is about one-and-one half inches. The erect penis stands out from the body at angles varying from zero to 60° to the horizontal. The size of the penis in the detumescent state has no bearing upon its erect size. The penis also varies in shape; the basic shapes being the blunt, prow and bottle types.



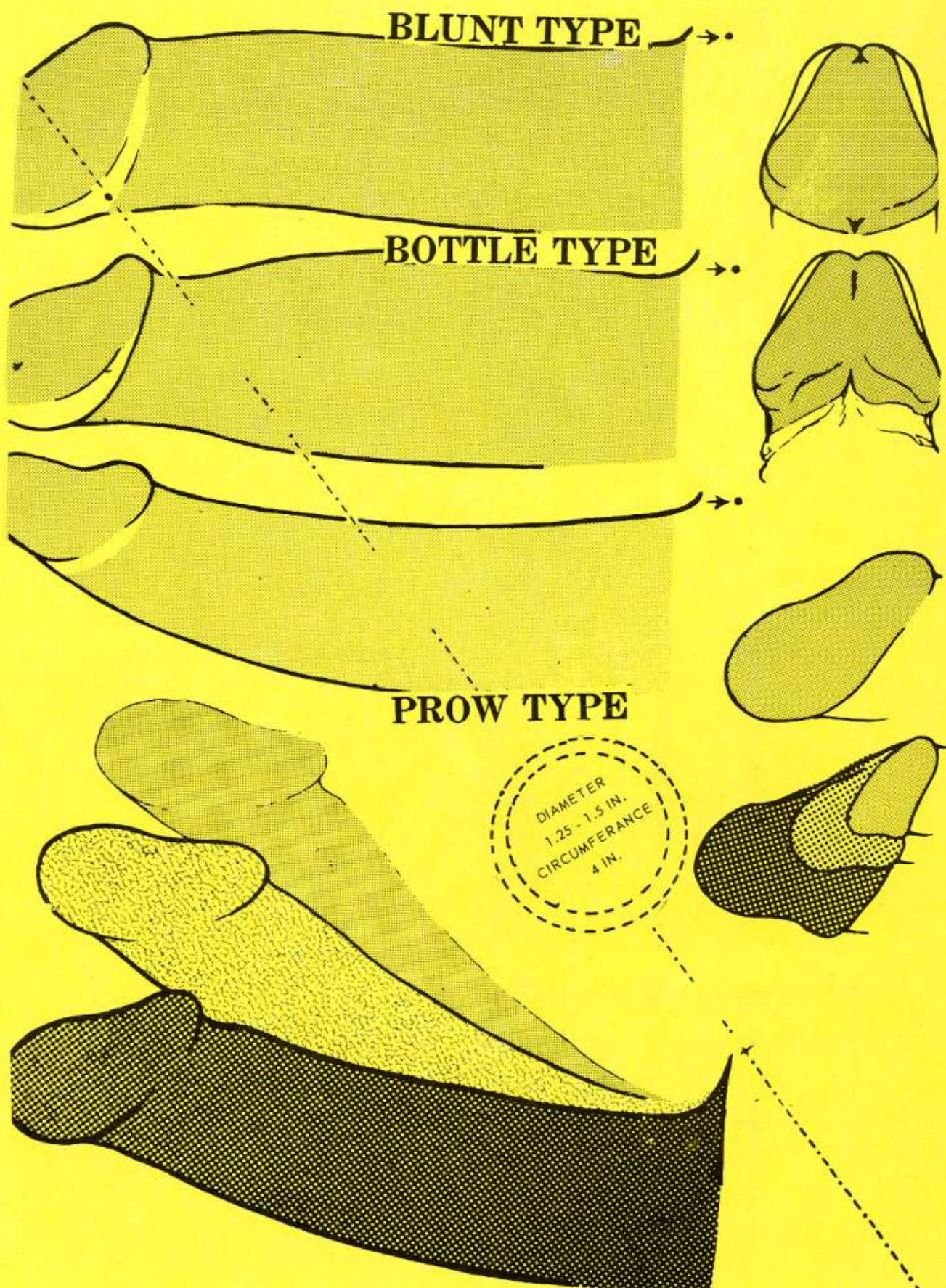


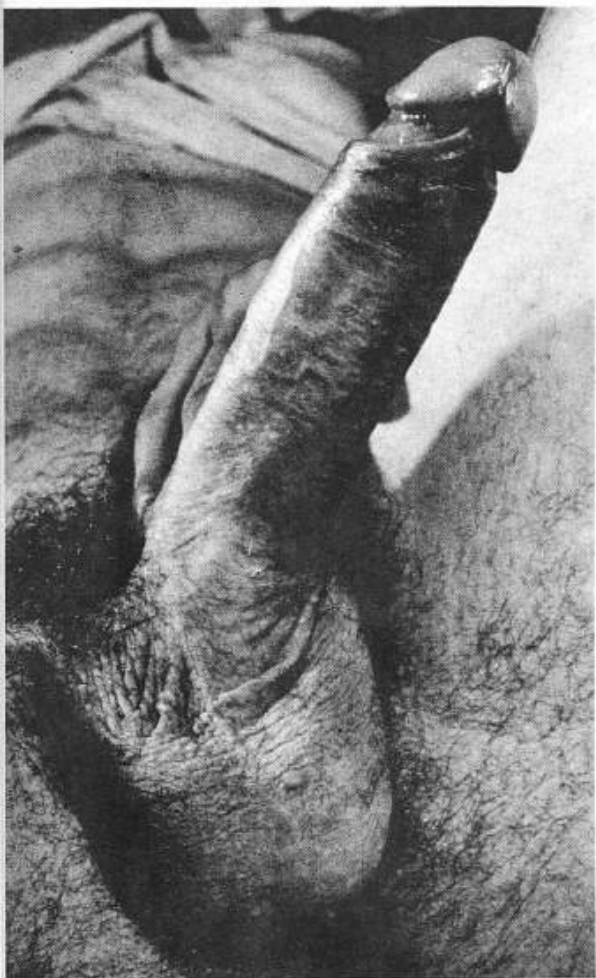
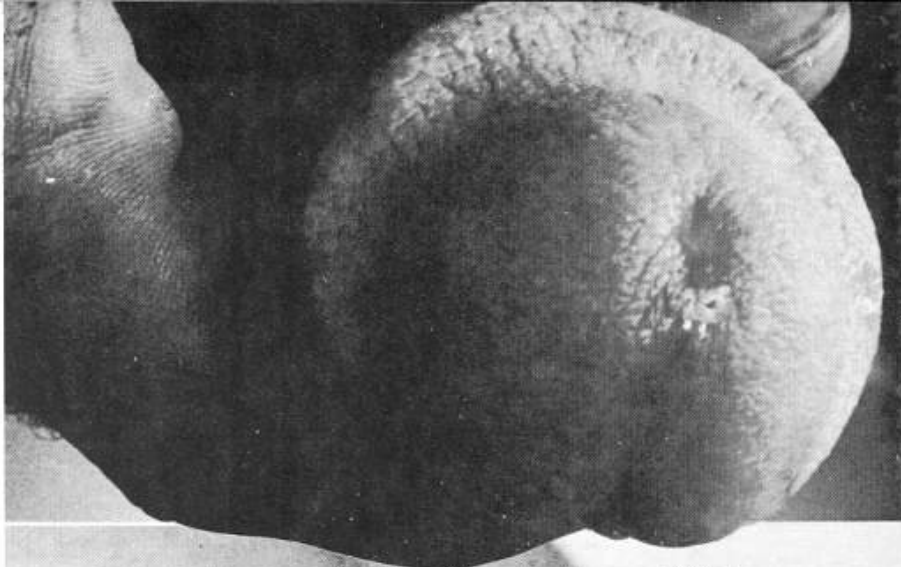
PENIS

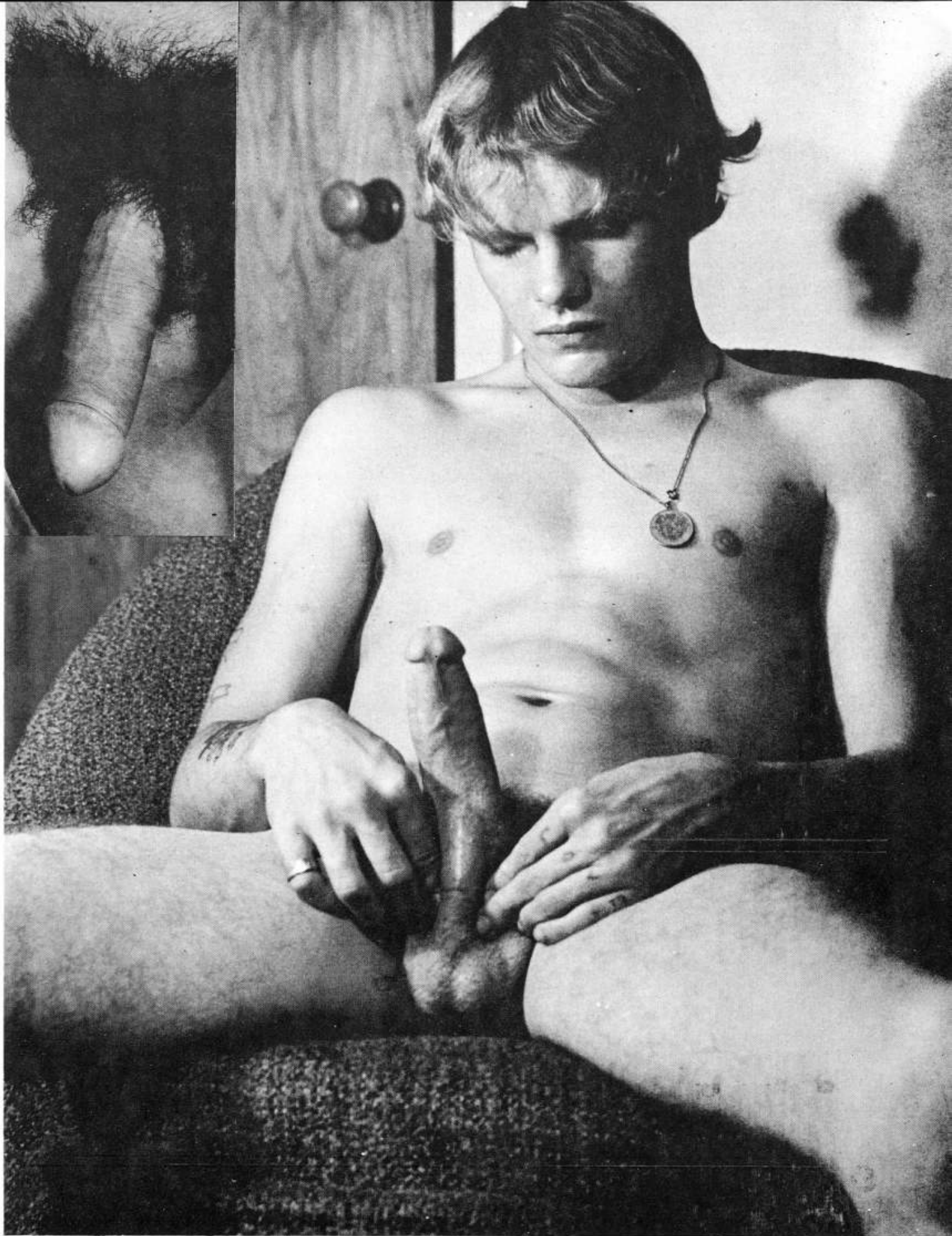
The skin of the penis, as well as that of the scrotum, is more highly pigmented than the skin of the rest of the body. A small ridge surrounds the glans, marking its separation from the shaft or body of the penis. This ridge is known as the corona or crown. It contains highly sensitive nerves which serve to increase the erotic sensations in the male when in contact with the ridges of the vagina. In the same manner, the corona stimulates the sensations in the female during coitus. Sensitive nerve endings are also scattered throughout the glans. While the most sensitive portion of the entire penis is located on the underside where the foreskin is joined to the shaft, the skin itself is not very sensitive.



Human Penis: Forms, Dimensions & Angles







SCROTUM

The scrotum is the sac which contains the testicles or male sex glands. The scrotum is suspended midline from the pubic bone and hangs below and behind the penis; it is a continuation of the abdominal wall. The organ is divided by a membranous wall or septum into right and left halves, each of these sacs containing and supporting one of the testes (testicles) with its epididymus. Generally, one testicle hangs lower than the other, as if arranged by nature to minimize the danger of the testes pressing together from sitting, etc. The testes are extremely delicate and intense pain results from pressure on them in any way. It is normal for veins to be visible or felt on the penis or scrotum.

Scattered in the tissue below the skin of the scrotum are fibers of smooth muscle called the dartos layer. The muscle fibers of the dartos layer contract in the presence of cold, and expand when exposed to warmth, causing the testes to lower away from the body. The testes produce spermatozoa at a temperature several degrees below usual body temperature. This is very important for normal sperm production. A simple, seemingly trivial matter such as the continual wearing of tight shorts could cause temporary partial infertility. A very hot bath lasting over a half hour can greatly disturb sperm production for weeks. When exposed to cold the scrotal skin becomes wrinkled and shrunken in appearance. This is caused by the testes positioning close to the perineum, that area of the body between the pubic mound and the anus, where the testes absorb warmth and thus maintain a temperature suitable for normal spermatogenesis (sperm production) and the viability of spermatozoa. Under normal temperature conditions the muscle fibers of the dartos layer are relaxed and the walls are relatively free from wrinkles.









CIRCUMCISION

A loose fold of skin, called the prepuce or foreskin extends over the glans. In most hospitals today it is surgically removed (circumcision), as a common practice in all newborn boys, for hygienic reasons. It is easier to keep a circumcised penis in healthy condition because the glans is tougher, rendering it less liable to infection, and because it prevents any natural secretion or smegma from accumulating under the foreskin. In the uncircumcised penis, care must be taken to remove this secretion by "skinning back" the foreskin and cleansing with soap and warm water. Otherwise, this accumulation may exude an unpleasant odor. Phimosis is the condition where the opening of the prepuce or meatus is too small to permit the full retraction of the glans penis. Phimosis prevents cleanliness and allows the buildup of old cells sloughed off and secretions possibly leading to bacterial infection. The material which accumulates around the corona of the glans, that proximal band of tissue encircling the widest part of the glans penis, is largely dead surface cells. This moist and decaying matter is called smegma. Aside from being hygienically useful, circumcision is also believed to be highly beneficial during adult life. Although little reliable information is available on the latter point, it is widely accepted that circumcision increases the staying power of the penis in the vagina prior to ejaculation. This is highly desirable because premature ejaculation has a disastrous effect on the happiness in sexual relations.



ERECTION

The phenomenon of erection occurs with sexual stimulation. During sexual excitation and the process of erection, the penis changes in size and direction; it becomes rigid, enlarged and elevated. The foreskin is retracted so that the head, or glans, becomes partly or entirely exposed. This change is made possible by the peculiar spongelike structure of the organ. All throughout the penis there are a large number of small hollow spaces or chambers. When these spaces are empty and their walls collapsed, the organ is flaccid; when they become distended with an increase inflow of blood, the penis becomes firm and erect. Its blood vessels, the arteries and the veins, are so constructed that they can allow an increased inflow and a diminished outflow of blood at the same time, so that all the spaces become engorged and distended. In addition, there is a great deal of elastic tissue in the penis which permits a considerable change in the dimensions of the organ. During an erection, it becomes both longer and wider. It is necessary for the penis to be firm and erect in order to penetrate the female vagina during sexual intercourse.



EJACULATION

The various secretions which form the composition of the seminal fluid are being produced continuously, but the actual blending of these fluids into semen occurs only at the moment of ejaculation. At this moment the muscular contractions of the genital tract force the spermatozoa from the epididymis of the testes, through a long tube called the vas, and together with the secretions of the seminal vesicles, into the urinary canal. At the same time the contractions of the prostate force its own fluid out through a number of small openings into the urinary canal close to the place where the sperm-fluid enters. There all the secretions are mixed together and are ejaculated in several bursts through the penis. Thus, the prostate acts as a controlling valve during intercourse. When control is lost over these muscles ejaculation of semen results. After ejaculation, the arteries regain their tonus and contract, allowing less blood to enter, and lessening the pressure on the constricted veins, and the penis returns to its flaccid state.

Many people are under the impression that since the seminal fluid and the urine pass through the same canal, the two secretions can mix and urine can be ejected during intercourse. This is untrue. The two do not mix because of a complex adaptation of the nervous and muscular mechanism of the urinary and genital systems. When a seminal emission takes place, the opening between the bladder and urethra is automatically shut off by a reflex contraction of the appropriate muscles, thus keeping the urine from passing into the urethra during this process.





TESTES

The testes produce male sex cells, spermatozoa or sperm; and the male sex hormone testosterone. The testes correspond to the ovaries in the female, which produce the female sex hormones, estrogen and progesterone. The testes lie within the septate scrotum, are oval in shape and measure about two inches in length and an inch across. During early fetal life they lie in the abdominal cavity. About two months before birth they drop out of the body cavity, descending with the spermatic cord along their inguinal canals into the scrotum. The outer layer of the testes is known as the tunica albuginea, a dense layer of white fibrous tissue. The fibrous septa or walls of the tunic extend into the substance of the testes, dividing each into over 250 wedge-shaped lobes. Each lobe has from one to three thin coiled tubules known as seminiferous tubules. If uncoiled one of these tiny tubules would measure about two feet in length. The male reproductive cells in all stages of development are located within these tubules; with mature spermatozoa present in the lumen, that is the center, along with the premature spermatogonia and primary spermatocytes found at the periphery near the germinal epithelium. In addition to the reproductive cells, supporting cells (Sertoli cells) are also found in the testes; along with interstitial (interspace) cells (Leydig cells), which are scattered among the tubules and which produce testosterone, the male hormone.

The seminiferous tubules unite to form a system of larger straight ducts leading into a meshwork behind the testis known as the rete testis. The tubules empty their spermatozoa into this network, the rete testis. About twenty coiled ductules leave the upper end of the rete and run through the "white tunic" of the testis into the epididymus.



PROSTATE GLAND

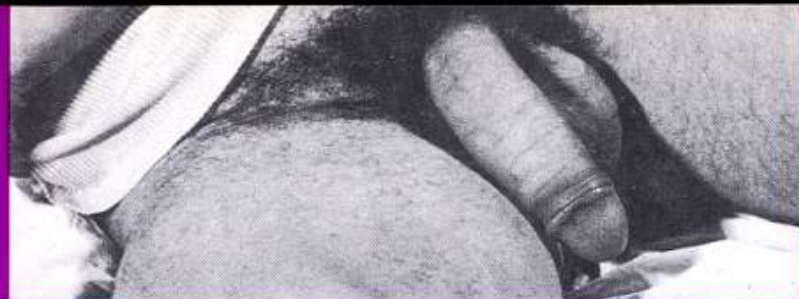
The prostate gland is a conical organ in shape, about the size of a walnut. It encircles the urethra just below the bladder and secretes alkaline fluid into it, also of aid to the swimming sperm. In older men growth of the prostate commonly obstructs the urethra, causing the need for more frequent urination, and sometimes requiring surgical removal of the part of the gland. It is also a site of cancer in the aged.

URETHRA

The urethra is a straight tube leading from the bladder, through the prostate, through the penis and outside the body. It transports both semen from the reproductive system, and urine. It extends from the internal urinary orifice in the urinary bladder to the external urethral orifice, or meatus, at the end of the penis.

The bulbourethral glands (Cowper's glands) are a pair of glands about the size of a pea which are located below the prostate on either side of the urethra. They also contribute an alkaline fluid to the semen.

The ureters, which are not part of the reproductive system, are a pair of tubes extending from the bladder; one leading to each kidney.







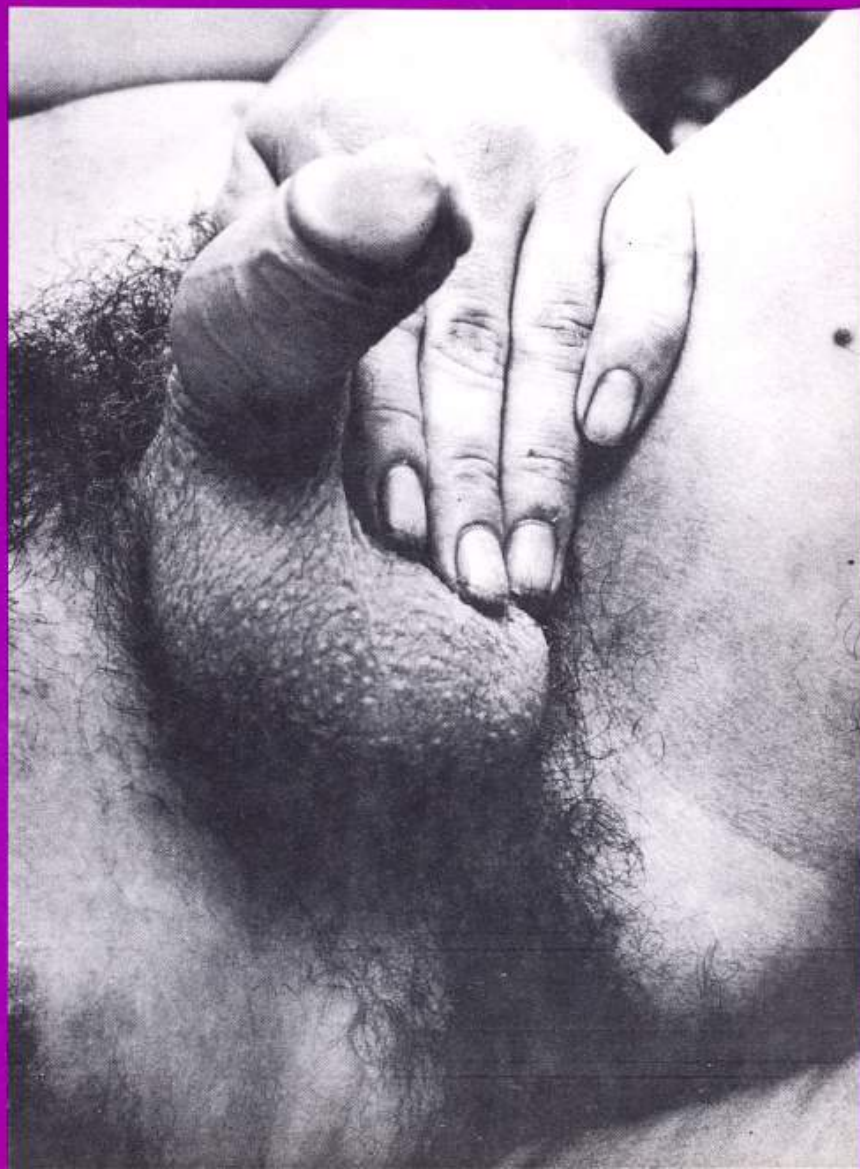
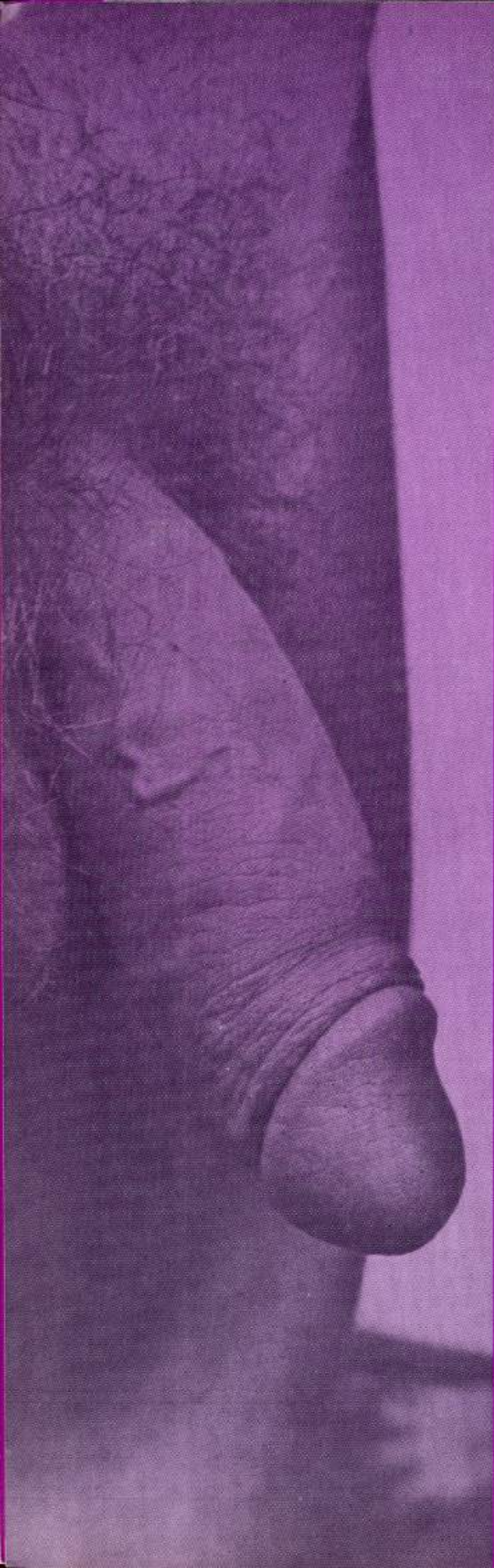
VAS DEFERENS

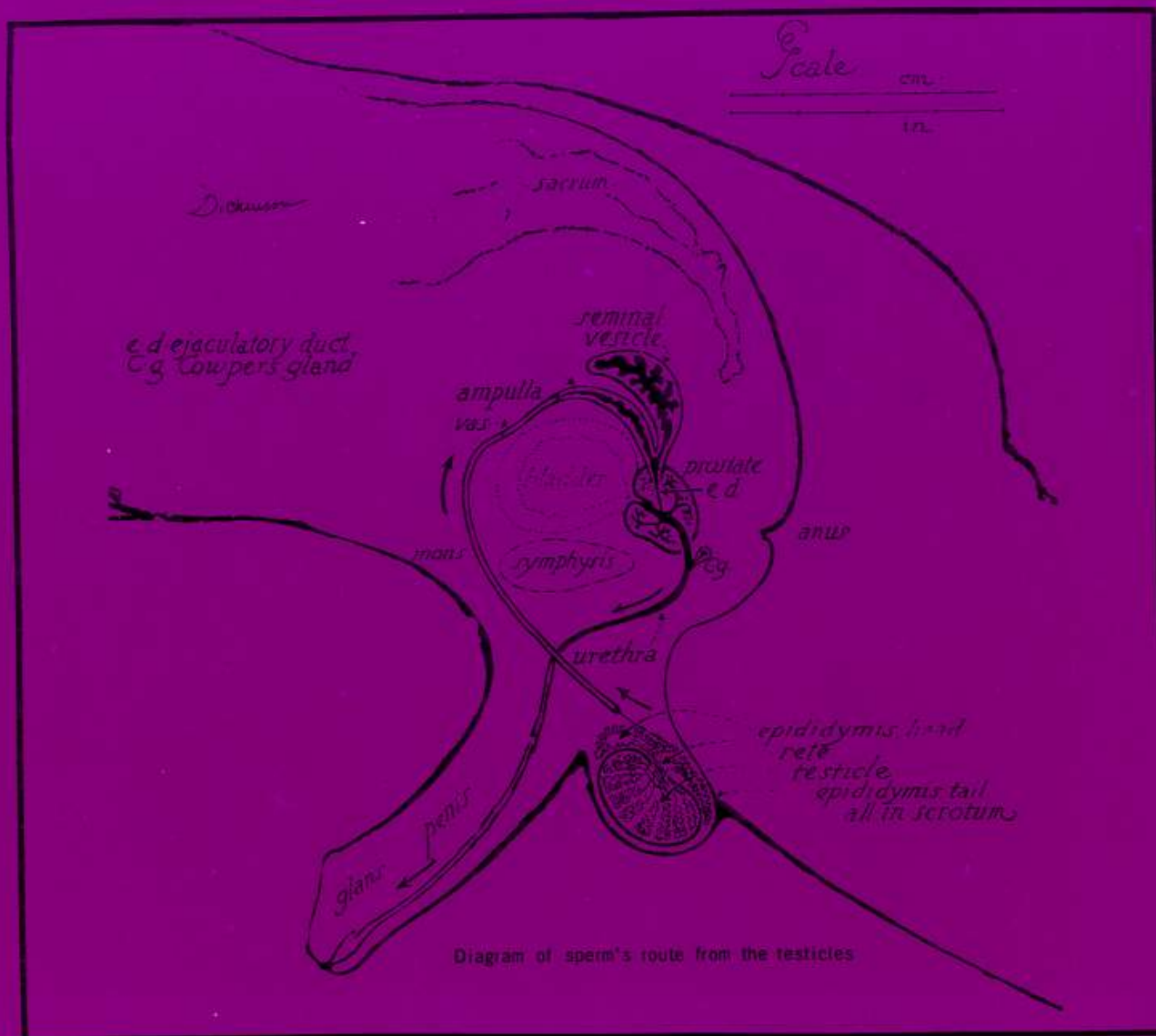
The vas deferens is a straight tube leading from the lower part of each epididymus to the urethra. It ascends about eighteen inches. The vas deferens is made up of three tissue layers; an inner mucous epithelium, a middle muscle layer and an outer fibrous coat. It is continuous with the epididymus. The vas, nerves, lymphatics and blood vessels make up the spermatic cord.



SEMINAL VESICLES

The seminal vesicles are membranous pouches of the vas deferens, lying behind the bladder at its base, each a convoluted sac. The seminal vesicles secrete a fluid which enhances the mobility of the sperm. Each of the vesicles ends in a stright narrow duct which joins and becomes part of the vas deferens, forming the ejaculatory duct. This duct is a tube about one inch long which runs through the base of the prostate gland and empties into the urethra. The ejaculatory duct ejects the sperm mixed in seminal vesicle fluid into the lumen of the prostatic portion of the urethra.













Orgasm and Ejaculation

At orgasm in the male, spermatozoa starting from the epididymus travel up the vas deferens, propelled by the muscular coating of the vas. Seminal fluid and additional spermatozoa are added from the seminal vesicles, and two to five million are ejected into the urethra by the ejaculatory duct, where prostatic fluid is added through the several ducts of that gland. The combination of seminal fluids and spermatozoa, known as semen, is fired through the urethra, in sexual intercourse, to be deposited in the female vagina near the uterus.

The mature male, over thirteen years of age, produces millions of sperm cells (spermatozoa) in the testes throughout life. Of course, numbers of cells produced decreases with advancing age. In the average ejaculation, which consists of nearly a teaspoonful of semen, there are approximately two to five hundred million spermatozoa. When the seminal fluid is first ejaculated, it is gelatinous in character, but within from three to fifteen minutes, it becomes liquified. While the semen is still in the gelatinous form, the spermatozoa remain motionless, but once liquefaction takes place, they begin to move more and more actively. Each spermatozoon measures about $1/600$ of an inch in length, and travels at the rate of about one inch in approximately eight minutes.









Growth of Sexual Characteristics

We now trace the gradual growth of the sex characteristics after fertilization. Although fertilization determines the pre-dominant sexual type, other factors may influence the development of the living creature that is to be born.

The sex organs are contained within a portion of the urinary apparatus of the embryo which develops very early and is distinguishable before the actual genital structures. We therefore, can speak of the "urogenital apparatus." This develops out of the mesoderm or central layer of the germinal membrane, which separates along the rudimentary spinal site and forms the so-called celom or embryonic body cavity and the urogenital canal. Within the earliest weeks of embryonic growth, the so-called pronephros emerges, and a duct runs from it. But, in the third week this structure is superseded by the mesonephros while the duct remains and develops to form the Wolffian duct. The mesonephros is differentiated from the urogenital canal in the seventh week and the kidneys assume their typical form. And two weeks before, on either side of the rudimentary spine and on the inner dorsal surface of the embryo, two folds or pads appear, called the genital ridges.

"Germ cells" or distinctively sexual cells, which have hitherto been scattered, congregate within these regions and modify the epithelial germ plasm into glands, which are differentiated at about six weeks. They develop either as testes or as ovaries, and send their distinctive hormones into the blood stream, acting thus already as functional endocrines. The germinal gonad is at first, however, undifferentiated sexually; it may therefore be modified in its male trend or its female; and it can be, and has been maintained that there is no absolute organic male nor absolute organic female, but that the structures which show the greatest number of female characteristics are feminine. The range of sexual differentiation in human beings is like the keyboard of a musical instrument, or a color chart. It runs the gamut from the palest to the deepest tints, even from black to white. There is an enormous diversity of intergrades or intermediate types between the typically masculine and the typically feminine.







Sexual Intermediate Types—

We have noted that the embryo, in its early stages, appears both male and female. Usually, the fetus acquires the sexual characteristics of one definite sex, but occasionally this differentiation is neither definite nor complete. There is no "clean-cut." Instead, while one sex may be dominant in physique and mind, there may be certain anomalies strongly suggestive of the opposite sex. If the endocrine secretions are abnormal either the actual gonads and genitalia, or the secondary characteristics (such as growth of hair, vocal pitch and bust development) or, finally, the direction of desire, will differ from the average type. Then we enter the far-reaching territory of hermaphroditism and intersexual types.

In certain cases it may be possible by surgical means, partially at least, to transform a



"man" into a "woman" and thereby cause the subject to assume a role more in keeping with his own feelings. It is unlikely, however, that a fully satisfactory solution could be thus found for such individuals, as a complete transformation, both in the physical and mental spheres is far from easy to attain. The possible permutations and combinations in the anatomy are very numerous. If the gonads and external genitalia contain examples of both sexes we can speak of hermaphroditism, they are genuinely hermaphrodites. If, on the other hand, the genitals are normal but the secondary characteristics atypical in structure, we speak of Androgyny. And, if the mental and emotional faculties and trends alone are affected, then we enter the areas of Transvestism, Homosexuality and Metatropism. All these types, which arise through disturbances in sexual differentiation from whatever cause, have been given the collective term "sexual intermediate types."





How important is a **BIG** PENIS?

An elaborate search of medical and other literature has brought to light no published series of measurements of the erect penis; nor do the few writers that do give figures state their sources of information.

Averages made up from the statements of nine authors who give any data show the flaccid penis 4" in length and 1 1/8" in diameter and 3 3/8" in circumference (4" x 1 1/8" x 3 3/8"); and the erect penis 15.5 cm. long 4 cm. broad and 11cm. around (6" x 1 5/8" x 4 3/8"). Length is usually measured from the body to the tip of the head, and the circumference around the middle of the shaft.

Among 50 cases studied the average length is 9.5cm. which is also the median. The circumference is the least variable, ranging from 8cm. to 10.5cm. and averaging 8.9cm., the most frequent being 9cm., with more than half being between 8.75cm. and 9.5cm.

There is little relationship between the size of the penis and body height. The size of the penis has less constant relation to the general physical development than that of any other organ in the body.

Indeed the external genitals are rather uniform in size. As found in examining over 8,000 males each testical and groin remained rather constant in size. In another study of 6,000 stripped males only 3 had very small sets of genitals and only one had what was considered a "gigantic penis". This was a negro whose penis measured 19cm. by 4cm. This was extremely unusual!!!

The Egyptian models found in tombs had little figures with large phalluses in three examples. Pictures on vases are our chief treasure house of knowledge of every day life of the Greeks. Copies of certain utensils indicate strongly how near modern penis dimensions are to the classic. Certain of the outlines are excluded as grotesques, in which bigness of the member stood for vigor, or was used to excite merriment of those direct and naked days.

Now if we suppose the Greeks to have been of our stature, we can use an arbitrary gauge by figuring from the modern thigh that averages 7" across to the thickest part in a man not shown to be obese, and by applying this comparison to any Greek figures which carry the penis erect. The Greek drawings show a pointed prepuce (foreskin). On this basis, among 59

examples, 26 run between 15.5cm. and 18cm. or an average of 15cm., or 6 inches, the figure which is accepted as a modern standard. In 14 of the 26 the length of the penis was about three-fourths the diameter of the owners thigh 13.5cm., or 5 1/4 inches, our own lower average; and in 12, the length equalled the thigh diameter and also checked as being half as long as the distance between elbow and beginning of the fingers, namely 18cm. or seven inches, just beyond our own upper average.

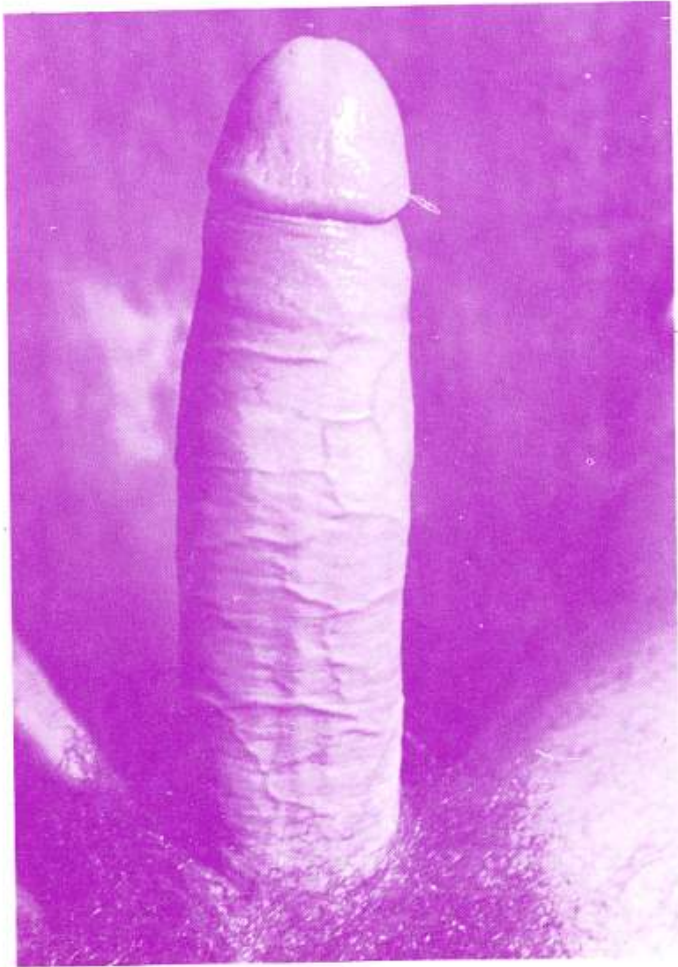
The Roman amulets and statues, except for a few grotesques, run as long as three-quarter or full thigh diameter, as do the older Italian examples. The *godemiche*, the phallus of self gratification, runs about 13 or 14 inches. Among several specimens some are double ended, some are straight, and some show only a slight curve.

The *Jardin Parfume* with a setting of 16th century Tunis, mentions the length of the erect penis to be from "twelve finger-breadths" or "three hand-breadths" to eight fingers of two hands. Without knowing what the Moslem hands of the period measured, and with no allowance for the exaggeration of elaborate sex tales but translating into terms of modern hands 3 1/2 to 2 1/2 inches this points to lengths ranging to 5 1/2 to 10 1/2 inches.

It is interesting to note that the nine authors previously mentioned do not include the famous Kinsey Report nor the latest study by Masters and Johnson. Both these more modern studies reach the same conclusion, that the average size of the human penis in full erection is around 6 inches, and that unusually large penises such as one reads about in sex stories are extremely rare.

Dr. W. B. Pomory says in his book, "Boys and Sex", that "it is a fact that the penis is the central points of the male anatomy as far as sex is concerned . . . but . . . there is not truth to the old tale that boys or men with large penises are more sexually potent or powerful than those with small ones . . ."

It is obvious then that the only conclusion we can reach is that a big penis is not important or necessary to successful sexual satisfaction. The primary appeal of a larger-than-average penis is fascination rather than function.







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